



CUPCAKE WARS



Raymond Recreation will be hosting our first Cupcake Wars for those that want to have fun with a little competition while showing off your favorite recipe and baking skills. Cupcake Wars is an American reality competition series that premiered in 2009. Each team will bake and decorate a dozen cupcakes.

There will be one round where your cupcakes will be judged for taste and presentation. Raymond Recreation will provide the basics (sugar, flour, eggs, vanilla, vegetable oil, baking powder, baking soda, salt, butter, milk, confectioners' sugar, cupcake papers and food coloring). Each team is required to bring your own special ingredients. Make sure to check your recipe (see our list of basics). Everyone must bring their own cupcake pan (let us know if you need to borrow one). All cupcakes and frostings must be made from scratch and have a written recipe.

Cupcake Wars is open to middle school students (grade 4-8), high school students (grade 9-12) and adults. Sign up as a team of 2-4 people. Cupcake Wars will be held at the RHS FCS room (room 109) on Saturday, December 2. MS students will start at 3:00 pm, HS students and adults will follow at 3:30 pm and 5:00 pm. Times may need to be adjusted based on the number of teams who register.

The cost is \$20 per team. Non-residents pay an additional \$5. The last day we will accept registrations, if space is available, is Thursday, November 30th.

----- CUPCAKE WARS • December 2023 -----

Contact's Name: _____ Phone: _____

Contact's Email: _____

Team Name: _____ Group: MS HS Adult

Team Members: _____

RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT

In consideration of the permission granted to the participant named below to participate in the above named program, I/we SHALL RELEASE, WAIVE DISCHARGE AND COVENANT NOT TO SUE the Town of Raymond, Recreation Department, their agent and employees from all liability for any and all loss or damage, and any claim or demands therefore on account of injury to the person or property or resulting in death of the named participant except in the case of gross or willful wanton negligence of the Town of Raymond, Recreation Department its agents and employee or otherwise while the named participant participates in the above named program.

I/we further agree to indemnify the Town of Raymond, Recreation Department, their agents and employees from any and all liability, loss or damage including but not limited to bodily injury, illness, death or property damage which the Town of Raymond, Recreation Department, their agents and employees become legally obligated to pay including reasonable attorneys' fees and costs, as a result of claims, demands, costs or judgments, against the Town of Raymond, Recreation Department, their agents and employees on account of injury to the person or property or resulting in the death of the named participant except in the case of gross or willful wanton negligence of the Town of Raymond, Recreation Department, their agents or employees and whether or not such liability is sole, joint or several.

I/we am aware that participation in this program may present a strain on my child's body, or its parts and therefore I represent to the Town of Raymond, Recreation Department that to the best of my knowledge, my child is in a proper physical condition to allow him/her to participate and that I/we assume the risk of participating.

I/we understand that the above program involves traveling to various activity sites. I/we will accept full responsibility for the transportation of my child to and from these activities and I/we release, indemnify and hold harmless and persons providing such transportation. I/we understand that in case of injury or illness, I/we will be notified. If it is impossible to contact me and it is an emergency, I/we hereby give permission to the attending physician to treat, hospitalize, administer anesthesia, or to order injections or surgery for the safety of my child.

I/we, the parent/legal guardian, the undersigned, have read this release and understand all its terms. I/we execute it voluntarily and with full knowledge of its significance. I/we have executed this release on this date indicated next to my/our names.

SIGNATURE OF PARENT/GUARDIAN

DATE